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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/927,972	08/10/2001	Woodrow W. Grandy	TSYS-25,410	5997	
30973 75	590 10/05/2006		EXAMINER		
	TONE, L.L.P.		BLACK, LINH		
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DALLAS, TX	75225		2163		
			DATE MAILED: 10/05/2006	5	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)				
	09/927,972	GRANDY ET AL.				
Office Action Summary	Examiner	Art Unit				
	LINH BLACK	2163	<u>:</u> :			
The MAILING DATE of this communication app Period for Reply	ears on the cover sheet w	vith the correspondence addres	is			
A SHORTENED STATUTORY PERIOD FOR REPLY WHICHEVER IS LONGER, FROM THE MAILING DA Extensions of time may be available under the provisions of 37 CFR 1.13 after SIX (6) MONTHS from the mailing date of this communication. If NO period for reply is specified above, the maximum statutory period was really received by the Office later than three months after the mailing earned patent term adjustment. See 37 CFR 1.704(b).	ATE OF THIS COMMUN 36(a). In no event, however, may a vill apply and will expire SIX (6) MO , cause the application to become A	ICATION. reply be timely filed NTHS from the mailing date of this commu. BANDONED (35 U.S.C. § 133).	: : :			
Status			:			
1) Responsive to communication(s) filed on 17 Ju	<i>aly</i> 2006.					
,						
•	3) Since this application is in condition for allowance except for formal matters, prosecution as to the ments is					
closed in accordance with the practice under E	ex paπe Quayle, 1935 C.	D. 11, 453 O.G. 213.				
Disposition of Claims						
4) Claim(s) 1.5 and 9-37 is/are pending in the app						
4a) Of the above claim(s) \(\frac{3}{2} - 2 \frac{1}{2} \) is/are withdraw						
5) Claim(s) is/are allowed.	,		•			
6) Claim(s) 1,5 and 9-37 is/are rejected.			:			
7) Claim(s) is/are objected to.	r alaction requirement		:			
8) Claim(s) are subject to restriction and/o	r election requirement.		:			
Application Papers	·		:			
9)☐ The specification is objected to by the Examine	er.		:			
10)☐ The drawing(s) filed on is/are: a)☐ accepted or b)☐ objected to by the Examiner.						
Applicant may not request that any objection to the	- · · ·		1			
Replacement drawing sheet(s) including the correct			1			
11) The oath or declaration is objected to by the Ex	caminer. Note the attache	ed Office Action or form P1O-1	152.			
Priority under 35 U.S.C. § 119						
12)☐ Acknowledgment is made of a claim for foreign a)☐ All b)☐ Some * c)☐ None of:	priority under 35 U.S.C.	§ 119(a)-(d) or (f).	•			
1. Certified copies of the priority documents have been received.						
2. Certified copies of the priority documents have been received in Application No						
Copies of the certified copies of the prio	rity documents have bee	n received in this National Sta	ge			
application from the International Burea						
* See the attached detailed Office action for a list	of the certified copies no	t received.				
			:			
			:			
Attachment(s)		·				
1) Notice of References Cited (PTO-892)		Summary (PTO-413) o(s)/Mail Date				
2) Notice of Draftsperson's Patent Drawing Review (PTO-948) 3) Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date		Informal Patent Application	: :			

DETAILED ACTION

This communication is in response to the Applicants' response dated 7/17/06. Claims 1, 5, 9-37 are pending in the application. Claims 1, 29, and 35 are independent claims.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

Claims 1, 5, 9-14, and 35-37 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 20010029322), and further in view of Rensimer et al. (US 6154726).

As per claim 1, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330, 0585 (to provide services to its user community: patients, doctors, nurses, laboratories, health management organizations), 0604; a plurality of templates/forms, each of the templates showing a plurality of relevant inquiries and capable of accepting data entry as yes/no entries by a user, said templates being accessible on the workstation or on a computer accessible by the workstation – pars. 0032, 0035, 0060, 0136, 0703-0705, 0721; and one or more sub-templates associated with at least a portion of said one

or more inquiries for providing modifiers describing in further detail said at least a portion of said one or more inquiries - fig. 32, item 2592; pars. 0136, 0274-287, 0703,

0732 (subsequent form/template); fig. 10a, items. 472-480; fig. 33. (Applicants teach

the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for

instance with the vomiting modifiers discussed above, it may be indicated that severe

vomiting is present, that the vomit is blood tinged and contains frank blood..."); said one

or more inquiries being configured for the entry of data relating to a medical condition

of a patient, said computer further defining at least one database for storing and

retrieving data relating to said one or more of said templates, inquiries, sub-templates

and modifiers - pars. 0129, 0273, 0726, 0136, 0703-0705, 0721, fig. 6, item 260; pars.

0732-0734.

a screen, capable of displaying a <u>template/form</u> capable of receiving entries of yes/no data - fig. 33, item 2612; pars. 0014, 0029, 0133, 0566, 0703; displaying for further selection by a health care professional user said one or more inquiries associated with a selected template of said one or more templates, and said one or more sub-templates having modifiers associated with a selected one or more inquiries, for receiving and storing in said at least one database entries of yes/no data obtained by at least one of observation, testing or and examination of a medical condition of a patient by a health care professional user – pars. 0136, 0703-0705, 0721, fig. 32, item 2592; pars. 0274-285; lliff teaches the MDATA system checks for and responds to

changing conditions over time – pars. 0027, 0033-0035.

a language program accessible by the workstation and capable of producing a language text report based on said data entered, said report utilizing said modifiers to summarize at least portion of said data – pars. 00343-0035, 0125, 0204, 0701-0702; fig. 3, items 170, 172.

Iliff teaches a computerized medical diagnostic and treatment advice system including network access - the title, par. 0014; provide services to its user community; patients, doctors, nurses, laboratories, health management organizations - par. 0585. Thus, lliff's teachings allow the health care professional user e.g. doctors, nurses,...to access a selected database or template (as cited above). Even though lliff teaches that patient can access the MDATA system to learn more about certain diseases/seeking medical diagnostic and treatment advice - par. - 0075, Iliff does not explicitly disclose "entering data obtained by a health care professional by observation, testing, examination". However, the Examiner finds that the health care professionals can also access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter patients' answers during the physical examination processes. And Iliff does not acknowledge that the health care professionals cannot enter patients' answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art.

Rensimer et al. (US 6154726) teach system and method for recording patient history data about on-going physician care procedures – the title; a system and method permits physicians and other medical staff personnel to record, accurately and

precisely, the treatment or care given in a particular patient encounter – col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23; patient medical status – col. 1, lines 50-61; col. 3, lines 35-45. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine lliff's teaching with Rensimer's teaching to allow users including patients, doctors, nurses, or health care professionals to enter data received from the testings/examinations/observations of patients to the medical system to better recording patients' history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients.

As per claim 5, Iliff teaches

wherein the database access display enables the selection of a template selector for medical history, medical examination, medical course and medical discharge and related matters – pars. 0017, 0035, 0464.

As per claim 9, Iliff teaches

select a sub-template for each of at least a portion of the template inquires, the sub-template including more detailed inquiries for the selected template inquiry to enable the user to enter more detailed data by yes/no entries – pars. 0032, 0035, 0136, 0274-0287, 0703-0705, 0721, 0732 (subsequent form/template); fig. 10a, items. 472-480; fig. 33.

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As per claim 10, Iliff teaches wherein the language program produces an English language text report of the entered data – pars. 0009, 0202, 0675, 0739.

As per claim 11, lliff teaches wherein the workstation is programmed to access additional databases of said at least one database – pars. 0196, 0237, 0560.

As per claim 12, Iliff teaches receive, distribute or direct distribution of all or selected portions of the entered data to at least one identified recipient or database – pars. 0273, 0739, 0750.

As per claim 13, Iliff teaches store the entered data and maintain a record of distribution of the entered data – pars. 0035-0036, 0083.

As per claim 14, Iliff teaches wherein the selected portions of the data are distributable automatically to the identified recipients or databases according to programmed instructions – pars. 0009, 0216, 0413.

Claims 15-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over lliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Florance et al. (US 6871140).

As per claims 15 and 17, lliff and Rensimer et al. do not explicitly suggest a single sentence report. However, in any field of services or businesses, a single sentence report or plural sentences report are well known, it depends on the users' needs. Florance et al. teach one-line, multi-lines reports – col. 54, lines 17-21. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine lliff and Rensimer et al.'s teachings with Florance et al.'s teaching in order to efficiently provided needed information to users.

As per claim 16, Iliff teaches forms and modifiers – pars. 0703; fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); Iliff also teaches the problem screening questions to determine patients' level of sickness or if patents need immediate attention - pars. 0274-285. Thus, users' entries to answer questions inherently allowed modifiers' adjectives to be modified such as severe headache/vomiting or little headache/vomiting etc...

Claims 27-31 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Maes et al. (US 20020002502).

As per claims 27 and 28, lliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not

explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer-based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer et al.'s teaching with Maes et al.'s teaching in order to provide users an efficient way to quickly answer/indicate a negative selection/response.

As per claims 29-31, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330, 0585 (to provide services to its user community: patients, doctors, nurses, laboratories, health management organizations), 0604; authorizing access - fig. 6, items 250, 272, 276, pars. 0074, 0190, 0196-0198; a screen, capable of displaying a template/form capable of receiving entries of yes/no data - fig. 33, item 2612; pars. 0014, 0029, 0133, 0566, 0703; Iliff teaches the MDATA system checks for and responds to changing conditions over time – pars. 0027, 0033-0035. one or more templates/forms, each of the templates showing a plurality of relevant inquiries and capable of accepting data entry as yes/no entries by a user, said templates being accessible on the workstation or on a computer accessible by the workstation – pars. 0136, 0703-0705, 0721; a sub-template for each of at least a portion

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of the template inquires, the sub-template including more detailed inquiries for the selected template inquiry to enable the user to enter more detailed data by yes/no entries - pars. 0136, 0274-0287, 0703, 0732 (subsequent form/template); fig. 10a, items. 472-480; fig. 33; providing the capability for a user to access a selected database or a selected template - fig. 6, item 260; par. 0196; a plurality of modifiers related to and associated with designated inquiries on at least a portion of the templates and at least a portion of the specific sub-templates showing more detailed inquiries related to the inquiries on the templates and sub-templates for the entry of additional data – fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); a retrievable database for storing and retrieving entered data from at least one of the templates, sub-templates and modifiers – fig. 6, item 260; pars. 0703, 0732-0734; a language program accessible by the workstation and capable of producing a language text report of the entered data – pars. 0701-0702; fig. 3, items 170, 172; producing a language text report based on said data entered, said report utilizing said modifiers to summarize at least portion of said data – pars. 00343-0035, 0125, 0204, 0701-0702; fig. 3, items 170, 172; relevant findings – pars. 0019, 0117, 0329, 0424; symptoms of a medical condition - pars. 0027, 0033-0035, 0201, 0269, 0284, 0287; facts/status of medical conditions - pars. 0027, 0033-0035, 0240.

Iliff teaches a computerized medical diagnostic and treatment advice system including network access – the title, par. 0014; provide services to its user community:

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patients, doctors, nurses, laboratories, health management organizations – par. 0585. Thus, Iliff's teachings allow the health care professional user e.g. doctors, nurses,...to access a selected database or template (as cited above). Even though Iliff teaches that patient can access the MDATA system to learn more about certain diseases/seeking medical diagnostic and treatment advice - par. - 0075, lliff does not explicitly disclose "entering data obtained by a health care professional by observation, testing, examination". However, the Examiner finds that the health care professionals can also access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter patients' answers during the physical examination processes. And lliff does not acknowledge that the health care professionals cannot enter patients' answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art. Rensimer et al. (US 6154726) teach system and method for recording patient history data about on-going physician care procedures – the title; a system and method permits physicians and other medical staff personnel to record, accurately and precisely, the treatment or care given in a particular patient encounter - col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23.

Iliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using

double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine lliff's teaching, Rensimer's teaching with Maes et al.'s teaching to allow users including patients, doctors, nurses, or health care professionals to enter data received from the testings/examinations/observations of patients to the medical system to better recording patients' history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients. In addition, not only that users can circle an answer indicating that is positive, users can also cross out an answer indicating a negative response to the question, thus, provide users an efficient way to quickly answer/indicate a negative/positive selection/response.

Claims 35-37 claim the same subject matter as of previous claims and are rejected based on the same ground of rejection.

Response to Arguments

Applicant's arguments with respect to claims 1, 5, 9-37 have been considered but are not persuasive. Applicants amended claims tremendously, please see new cited columns and lines above.

Conclusion

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Any inquiry concerning this communication or earlier communications from the examiner should be directed to LINH BLACK whose telephone number is 571-272-4106. The examiner can normally be reached on 8am - 5pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Don Wong can be reached on 571-272-1834. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

INH BLACK

Examiner Art Unit 2163

September 27, 2006

ALFORD KINDRED PRIMARY EXAMINER